

7c943

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A.S.	943	9-19-1
RESPONSE FORMALITY REVIEW	43	1127	03/05/02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 . Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date	Claim	Date	Claim	Date
Final		Final		Final	
Original		Original		Original	
1		51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
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11		61		111	
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42		92		142	
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44		94		144	
45		95		145	
46		96		146	
47		97		147	